

## AB155. 131. Super-selective angioembolization of rectal arteriovenous malformation: a case report

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**Background:** Arteriovenous malformation (AVM) of the gastrointestinal (GI) tract is a relatively rare condition; nevertheless, it is a well-recognized cause of intestinal bleeding. Specifically, rectal AVM is even rarer with an incidence rate of 0.9% to 2.9% of all the GI AVMs. We report the case of a rectal AVM that was successfully treated with super-selective angioembolization.

**Methods:** A 64-year-old male with a known history of rectal AVM was admitted with multiple episodes of rectal bleeding. Upon reviewing his prior radiological investigations and colonoscopy images, he was considered for angioembolization. This was carried out as a two-stage procedure in which super-selective coil embolization

of largest feeding vessels to the AVM was preformed successfully. Three vessels were coiled in the first stage and two in the second stage, 2 weeks later. Completion computerised tomography (CT) angiogram revealed very little abnormal blood flow to the AVM, and there were no signs of rectal ischemia. Patient had no further episodes of rectal bleed.

**Results:** A case of complex rectal AVM was successfully treated with superselective angioembolisation, carried out as a two-stage procedure.

**Conclusions:** Rectal AVM poses an important surgical presentation and different therapeutic modalities have been described in literature, including medical, surgical, endoscopic and/or interventional radiology. We recommend opting for angioembolization as it provides an effective and minimally invasive therapeutic approach.

**Keywords:** Rectal arteriovenous malformation (rectal AVM); angioembolization

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